11-14-07.

PTO/SB/17 (10-07

Approved for use through 06/30/2010. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE t of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number. Under the Paperwork Reduction Fees pursuant to the consolidated Appropriations Act, 2005 (H.R. 4818). Complete if Known 10/516,768-Conf. #2832 **Application Number** FEE TRANSMITTAL December 3, 2004 Filing Date Naoto Minamino First Named Inventor For FY 2008 **Examiner Name** R. M. Deberry Applicant claims small entity status. See 37 CFR 1.27 1647 Art Unit **TOTAL AMOUNT OF PAYMENT** 62273(71526) (\$) 180.00 Attorney Docket No. METHOD OF PAYMENT (check all that apply) Credit Card None Other (please identify): Check Money Order Deposit Account Name: Edwards Angell Palmer & Dodge X Deposit Account Deposit Account Number: 04-1105 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of Credit any overpayments fee(s) under 37 CFR 1.16 and 1.17 **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **EXAMINATION FEES FILING FEES SEARCH FEES Small Entity Small Entity Small Entity Application Type** Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Utility 310 155 510 255 210 105 105 100 50 130 65 Design 210 Plant 210 105 310 155 160 80 255 620 310 Reissue 310 155 510 Provisional 210 105 0 0 0 0 **Small Entity** 2. EXCESS CLAIM FEES Fee (\$) Fee (\$) Fee Description Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 105 210 Multiple dependent claims 370 185 Fee Paid (\$) **Multiple Dependent Claims Total Claims Extra Claims** Fee Paid (\$) Fee (\$) - 20 = HP = highest number of total claims paid for, if greater than 20. Fee Paid (\$) Indep. Claims **Extra Claims** - 3 = HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Fee Paid (\$) **Total Sheets Extra Sheets** Number of each additional 50 or fraction thereof Fee (\$) /50 = - 100 = (round up to a whole number) x Fees Paid (\$) 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) 180.00 Other (e.g., late filing surcharge): 1806 Submission of an Information Disclosure Statement

| SUBMITTED BY | | | | | |
|-------------------|--------------------|-----------------------------------|--------|-----------|-------------------|
| Signature | (Mit Ch | Registration No. (Attorney/Agent) | 38,256 | Telephone | (617) 517-5558 |
| Name (Print/Type) | Christine C. O'Day | | | Date | November 12, 2007 |



Docket No.: 62273(71526)

(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of: Naoto Minamino et al.

Application No.: 10/516,768

Confirmation No.: 2832

Filed: December 3, 2004

Art Unit: 1647

For: NOVE

NOVEL PEPTIDES HAVING CAMP

PRODUCING ACTIVITY

Examiner: R. M. Deberry

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT (IDS)

MS Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

In accordance with 37 CFR 1.97, Applicant(s) hereby make of record the following additional documents. A PTO Form SB/08 and a full copy of each of the documents required under 37 CFR 1.98(a)(2) accompany this statement.

Applicant(s) have become aware of the following documents, cited in an Supplementary Partial European Search Report issued <u>July 11, 2007</u>, during the prosecution of European Application No. 03730658.6, which corresponds to International Application No. PCT/JP03/06641, and the above referenced application, and in accordance with 37 CFR 1.97(c) and (e)(1) or (b)(3), hereby submit(s) these documents for the Examiner's consideration. These documents are cited on the enclosed PTO Form SB/08, and a copy of the Supplementary Partial European Search Report and of each document required under 37 CFR 1.98(a)(2) cited thereon are enclosed as well.

This statement is not to be interpreted as a representation that the cited documents are material, that an exhaustive search has been conducted, or that no

642031

Application No.: 10/516,768 2 Docket No.: 62273(71526)

other relevant information exists. Nor shall the citation of any document herein be construed *per se* as a representation that such document is prior art. Moreover, Applicant(s) understand(s) the Examiner will make an independent evaluation of the cited documents.

This Information Disclosure Statement is filed more than three months after the U.S. filing date, OR more than three months after the date of entry of the national stage of a PCT application, AND after the mailing date of the first Office Action on the merits, whichever occurs first, but before the mailing date of a Final Office Action or Notice of Allowance (37 CFR 1.97(c)).

The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 04-1105, under Order No. 62273(71526). A duplicate copy of this paper is enclosed.

Dated: November 12, 2007

Respectfully submitted,

Christine C. O'Day

Registration No.: 38,256

EDWARDS ANGELL PALMER & DODGE

LLP

P.O. Box 55874

Boston, Massachusetts 02205

(617) 517-5558

Attorneys/Agents For Applicant

Ertificate of Express Mailing Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. EM054389495US in an envelope addressed to:

MS Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

| on | November 12, 2007 Date | | |
|----|---------------------------|--|--|
| | | | |

| - Sym 5 | marcoss | | | | |
|---|------------------------------------|--|--|--|--|
| Signature | | | | | |
| Lynn Marcus | | | | | |
| Typed or printed name of person signing Certificate | | | | | |
| Registration Number, if applicable | (617) 239-0100 Telephone Number | | | | |

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Supplemental Information Disclosure statement (2 pages) IDS (Citation) by Applicant (6 References) (1 page) Copy of EP Search Report Fee Transmittal (1 page) Return Receipt Postcard